



CERTIFICATION APPLICATION FORM

APPLICANT'S NAME: _____ DOB: _____

ADDRESS: _____ City & Zip _____ State _____

PHONE NUMBER: _____ ALTERNATE NUMBER: _____

EMAIL: _____ Alternate EMAIL: _____

OCCUPATION/ EMPLOYER: _____

Certification for:

Are you taking the Fast Track? _____ When? _____ Regular Track? _____ Commencing when? _____

Crash Course? _____ Certification Examination Only? _____ IATTP Courses? _____

A. Fitness Certification Course

_____ Hammock Fitness _____ Aerial Hoop Fitness _____ Aerial Dance Fitness

B. Aerial Performance Arts

_____ Aerial Hammock Level 1 _____ Aerial Hammock Level 2

_____ Aerial Lyra/ Hoop Dance – Level 1 _____ Aerial Lyra/ Hoop Dance – Level 2

_____ Aerial Silks/Tissu Level 1 _____ Aerial Silks/Tissu Level 2

FEE: _____ Full Payment: _____ 3 Month Installment: _____

Eligibility (Check all applicable):

	1. A current aerial instructor with at least 1 continuous teaching experience (proof of experience e.g. W-2, W-9)
	2. An aerial student with at least 2 years continuous enrollment; or

	3. Any certified personal trainer; certified yoga, pilates or gyrotonics (copy of valid certificate); or
	4. An aerialist, dance or gymnastic instructors with at least 2 years experience (proof of experience e.g. W-2, W-9); or
	5. Any person who acquired residency of at least 20 teaching hours or 40 assisting hours in fitness, personal or gymnastic training or related disciplines (evidence required), 1 year or immediately prior to the IATTP training; or
	6. Alternatively: Evaluation Test to be conducted by RKP to evaluate Strength - Endurance – Flexibility – Coordination skills (fee applies); and
	7. CPR certification or its equivalent of the applicant’s country (to be accomplished prior to release of IAATP certificate)

Intellectual Property:

____ I understand that I am not to share any training materials, media files produced or generated during training, as well as subject matters relating to copyright, trademarks and intellectual property materials, including manuals, videos and other information that reflects the training syllabus, design, program and other similar effects to any person, regardless of relationship with the applicant. Said materials are the intellectual property of Aerial Arts America (AAA) and the Ruby Karen Project (RKP). Breach of intellectual property rights aforementioned in this application and foregoing trainings and alike shall have consequences including reimbursement of legal fees and costs to prosecute, obtain damages and/or in any form protect AAA and RKP from further damages caused directly or indirectly as a result of such violation.

Named Credits:

____ Upon completion of IATTP and having become an AAA certificate holder, applicant is required to include in any of its name branding or identification the following:

(Name) Jan Smith
IATTP Certified Teacher
Accredited by Aerial Arts America

I declare under penalty of perjury, that all statements contained in this application and any accompanying documents are true and correct, with full knowledge that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for removal, rejection or stripping of any and all training credits and certification.

Executed at: Please state, city and state: _____

Applicant’s Signature: _____ Dated: _____

**** Please note that by filling out the form and emailing this to us, you acknowledge and consented to all information contained in this application. Scanned and completed forms/ copies shall be considered original. As a follow-up, please print out this application package, sign and date the same prior to transmitting via email or handing this packet in person.

Media Release Form

Name of Applicant: _____

Permission to Use Media Materials

I grant to America Aerial Arts Institute dba Aerial Arts America (also known as "AAA") and Ruby Karen Project (also known as "RKP"), the right to take photographs of me in connection with the above-identified event. I authorize "AAA" and "RKP", its assigns and transferees, to copyright, use, and publish the same in print and/or electronically.

I agree that "AAA" and "RKP" may use such photographs and other forms of media recorded of me with or without my name and for any lawful purpose, including such purposes as publicity, illustration, advertising, web content, fundraising and other projects of the "AAA" and "RKP" and its affiliated organizations, including its sponsors.

I have read and understand the above:

Signature of Applicant: _____

Printed name (Guardian's name) _____

Address _____

Date _____

Signature of Parent/ Guardian _____
(if under age 18)

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PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of American Aerial Arts Institute dba Aerial Arts America, the Ruby Karen Project, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "AAA"), I hereby agree to release, indemnify, and discharge "AAA", on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in aerial arts activities entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

The risks include, among other things: slips and falls; falling from equipment; collision with fixed objects or people; rope burns; muscular strains and tears, fractured bones, bruises, cuts, organ damage, nerve damage, head, neck and back injuries; scratches, bruises, sprains, lacerations, or even more severe life threatening hazards; psychological damage; dehydration; permanent disability; the possibility of eye damage or loss of hearing; the failure to work out safely or within one's own ability or within designated area; the negligence of other participants or persons who may be present; my own physical condition, and the physical exertion associated with this activity; traveling to and from shows, meets or exhibitions raises the possibility of any manner of transportation accidents.

Furthermore, "AAA" employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless "AAA" from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of "AAA"'s equipment or facilities, **including any such claims which allege negligent acts or omissions of "AAA"**.

4. Should "AAA" or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against "AAA", I agree to do so solely in the state of California, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against "AAA" on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Applicant _____ Print Name _____
Address _____
Phone Date _____

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